

Work Order ID 100290***100290***

Page 1

April-22-13 12:52:51 PM

Item ID: D2013-3

Accept

Revision ID:

Item Name: Mirror Bracket LH, 212

Start Date: 5/22/13 Start Qty: 6.00

6

Required Date: 5/28/13 Req'd Qty: 6.00

6

Reference:

Approvals: Process Plan: MU5Date: 13-04-24 Tooling:

QC: Date: _____ SPC (Y/N): _____

Cust Item ID:

Customer:

Setup Start ***NS1***Stop ***NS2***Run Start ***NR1***Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr	Memo	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
D2013	Rev C		0.00							SB/367/04
100			0.00							
100	NC BRAKE									
Brake NC										
Brake NC		1-Punch as per template D2013-13 and Dwg D2013 2-Flatten ends of D2013-3 tube as per Dwg D2013 using DT8545 3-Bend (1) tube as per Dwg D2013 using Jig DT8201 Identify as D2013-3. 4-Deburr as required	0.00							
110	QC5- Inspect part completeness to step on W/O		0.00							
110										
QC										
Quality Control										

DAS
27
9-89
13.8.20

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng.	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other							
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled							

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100290

Page 2

Item ID: D2013-3

Accept

Setup

Start

NS1

Revision ID:

Item Name: Mirror Bracket LH, 212

Stop

NS2

Start Date: 5/22/13 Start Qty: 6.00

6

Required Date: 5/28/13 Req'd Qty: 6.00

6

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____
QC: _____ Date: _____ SPC (Y/N): _____

Date: _____ Run Start *NR1*
Date: _____ Stop *NR2*

Sequence ID/
Work Center ID
120
120
Packaging
Identify as per dwg & Stock Location: W/1001

Operation Description
Set Up/
Run Hours
0.00

Tool ID Tool # Plan Accept Reject Reject Insp.
Code Qty Qty Number Stamp

6 EL 13-8-20

Packaging
Memo
0.00

130
130
QC
Quality Control
QC21- Final Inspection - Work Order Release
Memo
0.00

MLJ 13-08-20
MLJ 13-08-20

DQA: _____ Date: _____

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS														
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>
Part No. _____			Work Order Update <input type="checkbox"/>																	
NCR No. _____																				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description			Sign & Date	Verification	QC Inspector								
Doc/Data																				
Equip/Tooling																				
Operator																				
Material																				
Setup																				
Other																				
Process																				
Supplier																				
Training																				
Unapproved																				
FAULT CATEGORY																				
Landing Gear				General																
				Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>												
				Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>												
				Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>												
				Crushed/Crimped <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>												
				Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>													
				Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>													
				Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>												
				Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>														
				Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>														
				Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>														
				Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>														

Picklist Print

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Page 1

Work Order ID: 100290

Parent Item: D2013-3

Parent Item Name: Mirror Bracket LH. 212

Start Date: 5/22/13

Required Date: 5/28/13

Start Qty: 6.00

Required Qty: 6.00

Comments: IPP Rev:A New Issue 05-11-01 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M304TR0.750W.049 304 RD Tube .750 x .049W		Purchased	No			100	f	497.6735	1.9473	12.298737			SB/2/09/04

Location	Loc Qty	Loc Code
MAT017	497.6734825	
122312	20.599	
122468	0.0000325	
124768	314.83665	
125068	162.2378	

H125513

TS

DQA: _____ Date: _____

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

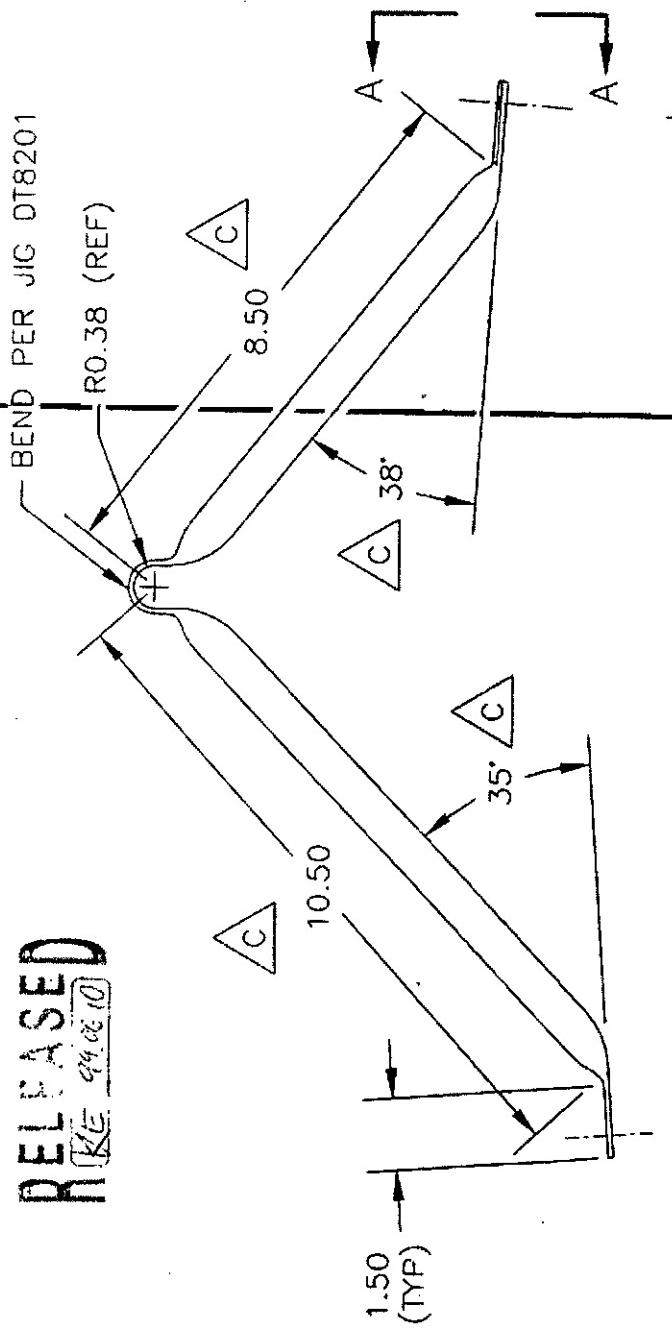
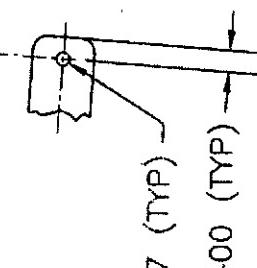
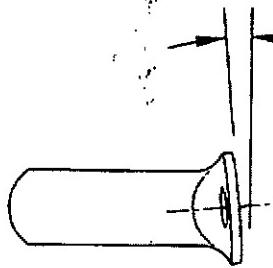
Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	
			Work Order Update <input type="checkbox"/>			Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>	
						Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Other <input type="checkbox"/>	
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance			Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
				Bending <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>				
				Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>				
				Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>				
				Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>				
				Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Part Moved <input type="checkbox"/>					
				Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>					
				Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>				
				Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>						
				Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>						
				Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>						
				Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>						

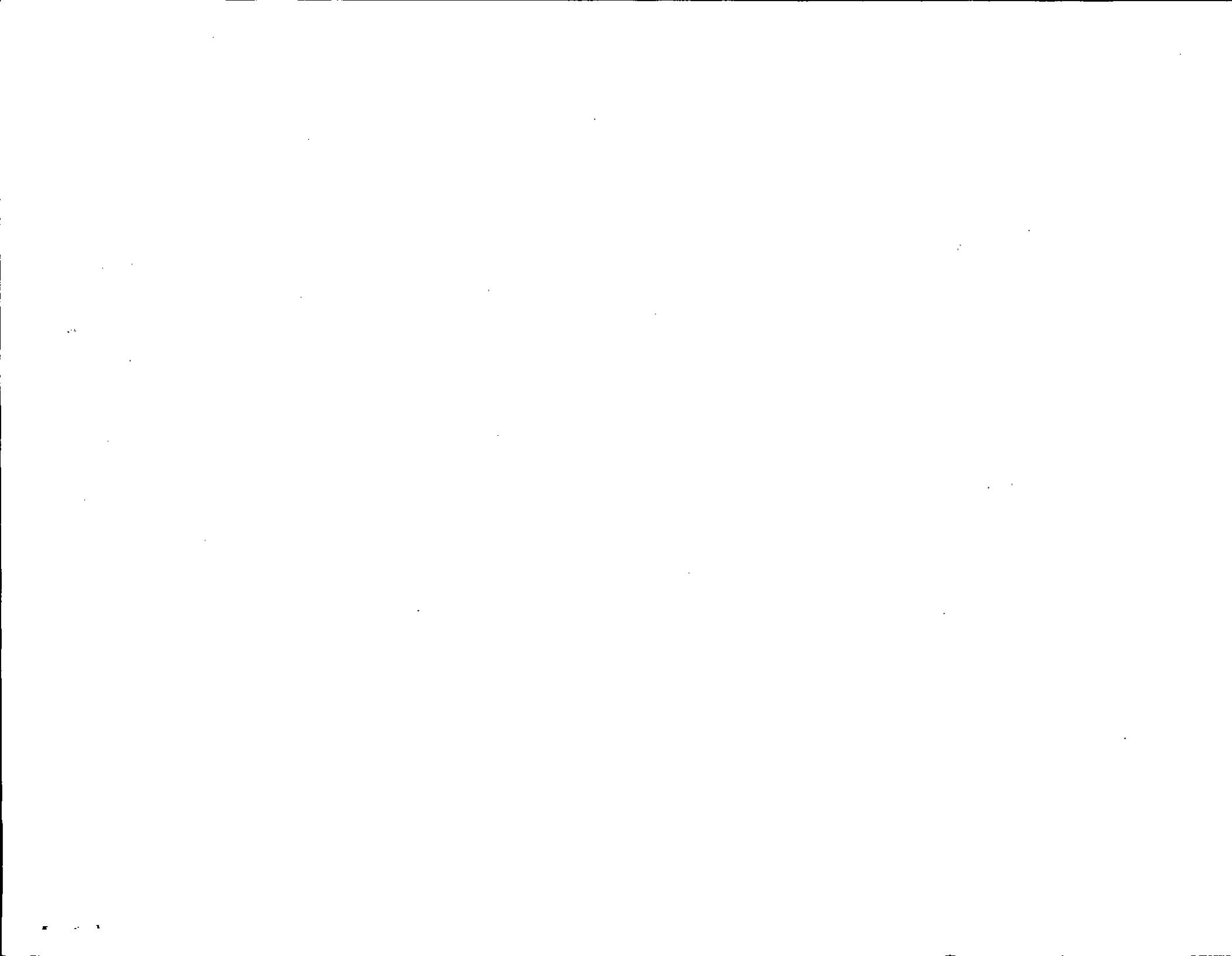
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DESIGN JB	DRAWN BY RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
CHECKED KE	APPROVED JD	DRAWING NO. D2013	REV. C SHEET 1 OF 3
DATE 99.06.07		TITLE MIRROR BRACKET	SCALE NTS
A	90.10.22	NEW ISSUE	
B	94.06.15	REDRAWN	
C	99.06.07	REDRAWN, CHANGE OF DIMENSIONS	

RELEASED PER JIG DT8201

R0.38 (REF)

RELEASED
KE 94.06.10100200
1304-24D2013-1 LH SHOWN
D2013-2 RH OPPOSITE
(FOR 205 MIRROR)CUT LENGTH: 23.25 INCHESVIEW A-AMATERIAL: AISI 304/316 SS SEAMLESS TUBE,
0.750 OD x 0.049 WALL

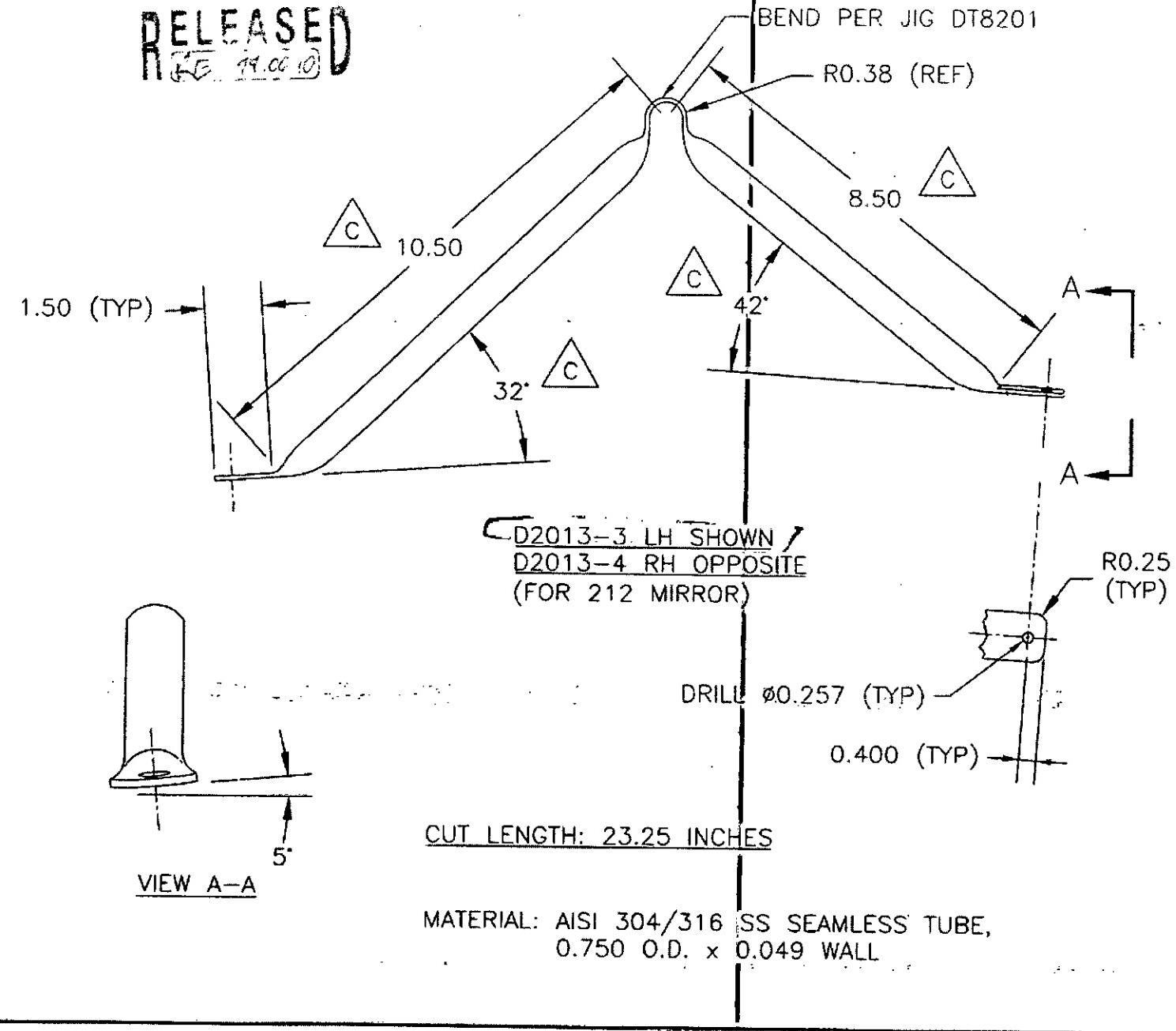


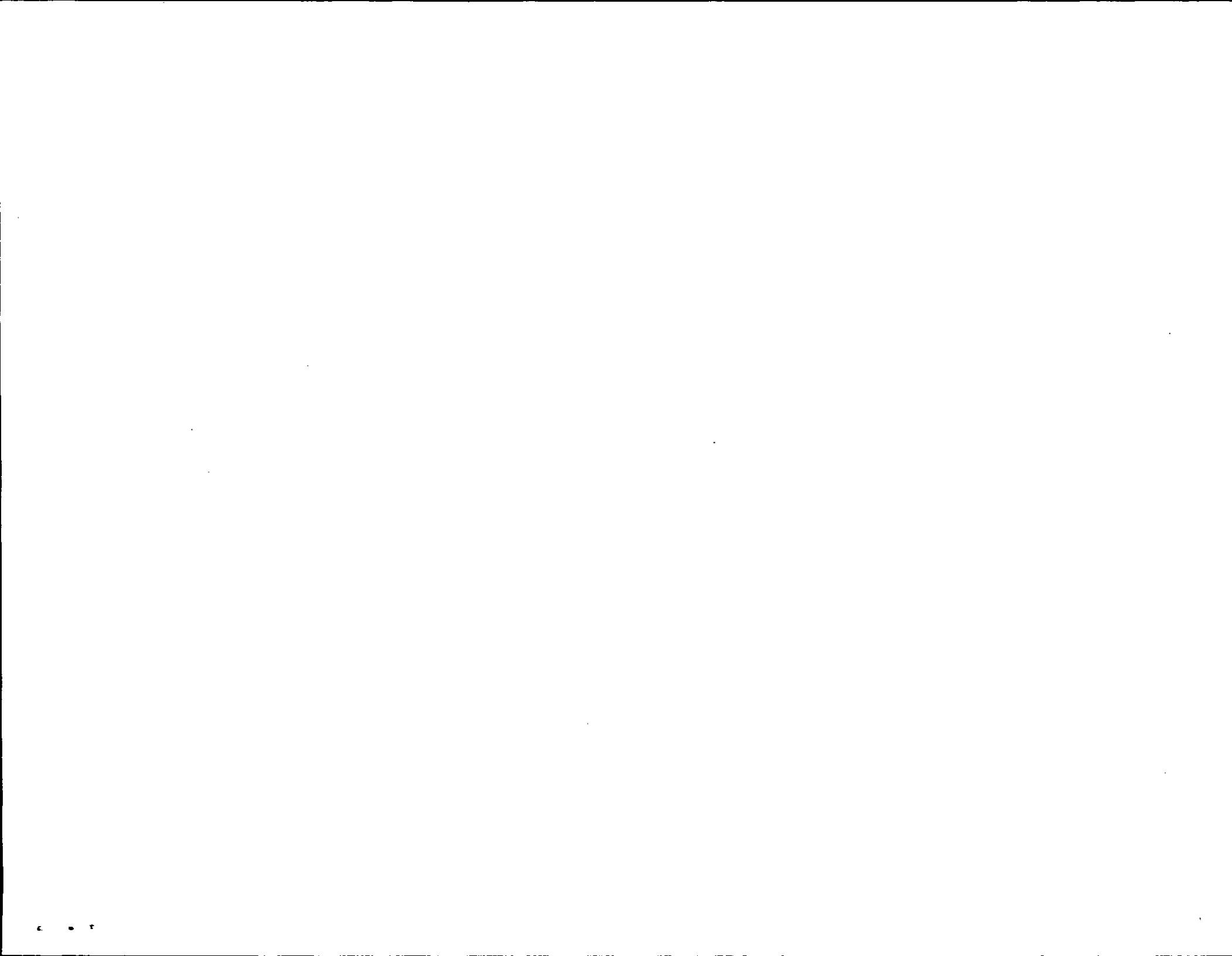


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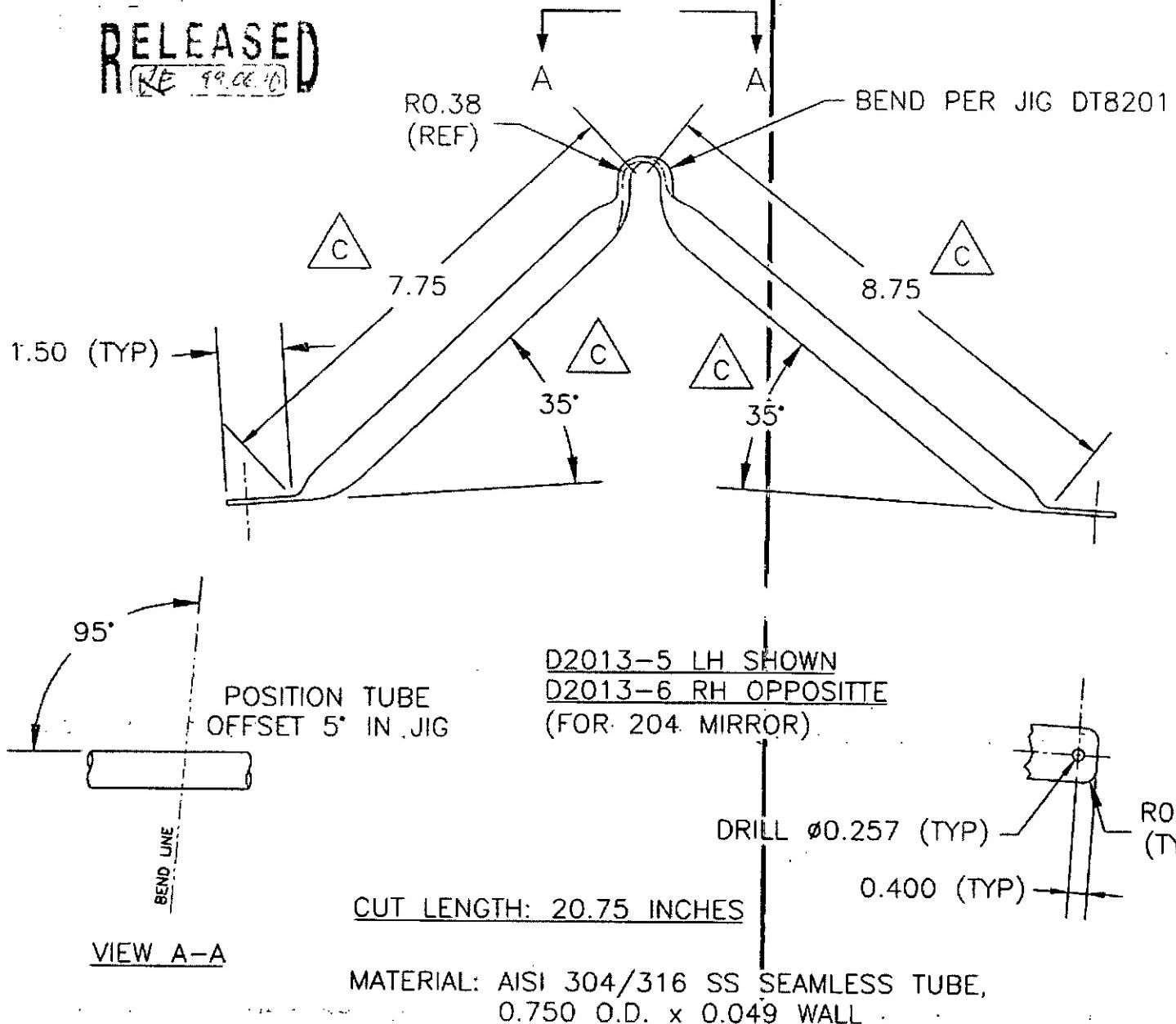
DESIGN JB	DRAWN BY RF	DART AEROSPACE LTD. HAWKESBURY, ONTARIO, CANADA
CHECKED KE	APPROVED JF	DRAWING NO. D2013
DATE 99-06-07	TITLE MIRROR BRACKET	REV. C SHEET 2 OF 3 SCALE N/A

RELEASED
DR 11.00 05





RELEASED
RE 99.06.0



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DESIGN CHECKED DATE	DRAWN BY APPROVED TITLE	DART AEROSPACE LTD HAWKSBURY, ONTARIO, CANADA REV. C SHEET 3 OF 3 SCALE NRS
RE 99.06.07	RJ D2013	

